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Image# 201604159012430770

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	or Other Than An	Authorized Co	mmittee	Of	fice Use Only
1. NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼	Example over the	: If typing, type lines.	12FE4M5	ince dee Only
TEXAS SPINE AND JO	INT HOSPITAL	PAC			
ADDRESS (number and street)	1814 ROSELAND BLV	'D			
Check if different than previously reported. (ACC)	TYLER			TX	75701
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦		STATE A	ZIP CODE ▲
C C00437525		3. IS THIS REPORT	× NEW OR	AMEN (A)	DED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  X April 15 Quarterly Report (Q1  July 15 Quarterly Report (Q2  October 15 Quarterly Report (Q3  January 31 Year-End Report (YE  July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)	(c) 12-Day PRE-Election Report for the (d) 30-Day POST-Election Report for the	ne: Converse	May 20 (M5  Jun 20 (M6  Jul 20 (M7)  ary (12P)  vention (12C)  eral (30G)		(M9) Dec 20 (M12) (Non-Election Year Only)  M10) Jan 31 (YE)  G) Runoff (12R)  in the State of
5. Covering Period 01	01 20		rough 03	31 Y	2016
I certify that I have examined this Type or Print Name of Treasurer	Report and to the be ANTHONY WAHL	st of my knowledg	ge and belief it is t	rue, correct and co	mplete.
Signature of Treasurer ANTHO	ONY WAHL	[Elec	tronically Filed]	Date 04	15 / 2016
NOTE: Submission of false, erroned	ous, or incomplete inforr	mation may subject	the person signing	this Report to the p	enalties of 2 U.S.C. §437g.
Office Use					FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### TEXAS SPINE AND JOINT HOSPITAL PAC

2016 03 2016 Report Covering the Period: 01 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 69865.94 January 1, 2016 (b) Cash on Hand at 69865.94 Beginning of Reporting Period..... 18052.00 18052.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 87917.94 87917.94 6(a) and 6(c) for Column B)..... 21000.00 21000.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 66917.94 66917.94 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### TEXAS SPINE AND JOINT HOSPITAL PAC

R	eport Covering the Period: From: 01	01 2016 To:	03 31 2016
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees		
	(i) Itemized (use Schedule A)	13753.00	13753.00
	(ii) Unitemized	4299.00	4299.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, 18052.00	18052.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	18052.00	18052.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received  Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal Candidates and Other Political Committees	0.00	0.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18.	Transfers from Non-Federal and Levin Funds  (a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	18052.00	18052.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	18052.00	18052.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
21. Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	15122 1110 1 51104	Calcinati Toul-to-Date		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating  Expenditures	0.00	0.00		
(c) Total Operating Expenditures	200	0.00		
(add 21(a)(i), (a)(ii), and (b))▶  2. Transfers to Affiliated/Other Party	0.00	0.00		
Committees	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	20000.00	20000.00		
Independent Expenditures     (use Schedule E)	0.00	0.00		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
6. Loan Repayments Made	0.00	0.00		
7. Loans Made8. Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00		
9. Other Disbursements	1000.00	1000.00		
O. Federal Election Activity (2 U.S.C. §431(20))  (a) Allocated Federal Election Activity  (from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00		
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
1. Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	21000.00	21000.00		
2. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	21000.00	21000.00		

#### **DETAILED SUMMARY PAGE**

of Disbursements

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	18052.00	18052.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18052.00	18052.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER (check only one)

X 11a 11b

FOR LINE NUMBER:				PAGE	6	OF	30		
(cl	he	ck only	or	ne)					
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UI	ioi commerciai purposes, other than using the	name and address of any political committee to	Solicit Communions from Such Committee.
$\rangle$	NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOS	SPITAL PAC	
	Full Name (Last, First, Middle Initial) TIMOTHY BECK Mailing Address 9132 CHEROKEE TRAIL  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer SELF EMPLOYED	State Zip Code TX 75703  C  Occupation PHYSICIAN	Date of Receipt  03 14 2016  Transaction ID: SA11AI.6537  Amount of Each Receipt this Period  100.00  Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial)  TIMOTHY BECK  Mailing Address 9132 CHEROKEE TRAIL  City  TYLER  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary General  Other (specify)   Other (specify)	State Zip Code TX 75703  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  400.00	Date of Receipt  M
	Full Name (Last, First, Middle Initial) TROY CALLENDER  Mailing Address 3413 GOLDEN ROAD  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary General Other (specify)	State Zip Code TX 75701  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  296.00	Date of Receipt  M M J 2016  Transaction ID: SA11AI.6540  Amount of Each Receipt this Period  111.00  Memo Item
s	UBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	311.00
T	OTAL This Period (last page this line number of	nly)	

FOR LINE NUMBER: PAGE 7 OF fo D

Petailed Summary Page   X 11a   11b   11c   12	se separate schedule(s)	(check only one)									
, , , , , , , , , , , , , , , , , , , ,	or each category of the etailed Summary Page	>	11a		11b		11c		12		
10 11			13		14		15		16		17

or for commercial purposes, other than using the	e name and address of any political committee to	Solicit Communions from Such Committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HC	SPITAL PAC	
Full Name (Last, First, Middle Initial)  TROY CALLENDER  Mailing Address 3413 GOLDEN ROAD		Date of Receipt
City TYLER	State Zip Code TX 75701	03 31 2016  Transaction ID : SA11AI.6572  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	111.00 Memo Item
SELF EMPLOYED  Receipt For:  Primary General  Other (specify) ▼	PHYSICIAN  Aggregate Year-to-Date ▼  407.00	
Full Name (Last, First, Middle Initial)  AARON CALODNEY  Mailing Address 17909 CR 132		Date of Receipt
City FLINT	State Zip Code TX 75762	02 03 2016  Transaction ID : SA11AI.6486  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	294.00
Name of Employer SELF EMPLOYED Receipt For:	Occupation PHYSICIAN	Memo Item
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	
Full Name (Last, First, Middle Initial)  AARON CALODNEY		Date of Receipt
Mailing Address 17909 CR 132		03 14 2016
City FLINT	State Zip Code TX 75762	Transaction ID : SA11AI.6517  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	294.00
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  784.00	
SUBTOTAL of Receipts This Page (optional)		699.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FO	R LINE	NU	MBER	:	PAGE	8	OF	30
(ch	eck only	or	ne)					
>	<b>1</b> 1a		11b		11c	12		
	13		14		15	16		17

	the name and address of any political committee t	o conon containations from baon confillittee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT H	IOSPITAL PAC	
Full Name (Last, First, Middle Initial)  AARON CALODNEY  Mailing Address 17909 CR 132		Date of Receipt
City FLINT  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary General Other (specify)	State Zip Code TX 75762  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼	Transaction ID : SA11AI.6547  Amount of Each Receipt this Period  294.00  Memo Item
Full Name (Last, First, Middle Initial)  JOHN CAMP  Mailing Address 606 CUMBERLAND ROAD  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer SELF EMPLOYED  Receipt For:  Primary General Other (specify)	State Zip Code TX 75703  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  357.00	Date of Receipt  O2
Full Name (Last, First, Middle Initial)  JOHN CAMP  Mailing Address 606 CUMBERLAND ROAD  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 75703  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  571.00	Date of Receipt  03
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	722.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) JOHN CAMP Date of Receipt Mailing Address 606 CUMBERLAND ROAD 2016 03 31 City Zip Code State Transaction ID: SA11AI.6567 **TYLER** TX 75703 Amount of Each Receipt this Period FEC ID number of contributing C 214.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 785.00 Other (specify) Full Name (Last, First, Middle Initial) B. STUART CRUTCHFIELD Date of Receipt Mailing Address 2066 CANBERRA COURT 02 03 2016 City State Zip Code Transaction ID: SA11AI.6487 TX **TYLER** 75701 Amount of Each Receipt this Period FEC ID number of contributing 298.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 497,00

Full Name (Last, First, Middle Initial) c. STUART CRUTCHFIELD Date of Receipt Mailing Address 2066 CANBERRA COURT 03 14 2016 City Zip Code State Transaction ID: SA11AI.6518 TX **TYLER** 75701 Amount of Each Receipt this Period FEC ID number of contributing С 298.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 795.00 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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810.00

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 10 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

ITEMIZED RECEIPTS 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) STUART CRUTCHFIELD Date of Receipt Mailing Address 2066 CANBERRA COURT 2016 03 31 City Zip Code State Transaction ID: SA11AI.6548 **TYLER** TX 75701 Amount of Each Receipt this Period FEC ID number of contributing C 298.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1093.00 Other (specify) Full Name (Last, First, Middle Initial) B. GUY DANIELSON Date of Receipt Mailing Address 16950 FM 2661 03 14 2016 City State Zip Code Transaction ID: SA11AI.6519 TX **FLINT** 75762 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 249,00 Full Name (Last, First, Middle Initial) c. GUY DANIELSON Date of Receipt Mailing Address 16950 FM 2661 03 31 2016 City Zip Code State Transaction ID: SA11AI.6549 TX **FLINT** 75762 Amount of Each Receipt this Period FEC ID number of contributing С 83.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 332.00 Other (specify) 464.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

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Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) ROBERT DENNIS Date of Receipt Mailing Address 1008 WILDER WOOD 2016 0.3 City State Zip Code Transaction ID: SA11AI.6489 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing C 271.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 452.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** ROBERT DENNIS Date of Receipt Mailing Address 1008 WILDER WOOD 03 14 2016 City State Zip Code Transaction ID: SA11AI.6520 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing 271.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 723.00 Full Name (Last, First, Middle Initial) c. ROBERT DENNIS Date of Receipt Mailing Address 1008 WILDER WOOD 03 31 2016 City Zip Code State Transaction ID: SA11AI.6550 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing С 271.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 994.00 Other (specify) 813.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) PAUL DETWEILER Date of Receipt Mailing Address 3635 CANYON CREEK CIRCLE 2016 0.3 City Zip Code State Transaction ID: SA11AI.6490 TX **TYLER** 75707 Amount of Each Receipt this Period FEC ID number of contributing 225.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. PAUL DETWEILER Date of Receipt Mailing Address 3635 CANYON CREEK CIRCLE 03 14 2016 City State Zip Code Transaction ID: SA11AI.6521 **TYLER** TX 75707 Amount of Each Receipt this Period FEC ID number of contributing 225.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600,00 Full Name (Last, First, Middle Initial) c. PAUL DETWEILER Date of Receipt Mailing Address 3635 CANYON CREEK CIRCLE 03 31 2016 City State Zip Code Transaction ID: SA11AI.6551 TX **TYLER** 75707 Amount of Each Receipt this Period FEC ID number of contributing С 225.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 825.00 Other (specify) 675.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 30 (check only one)

X 11a 11b 11c 12

13 14 15 16 11

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC			
Full Name (Last, First, Middle Initial)  KIM FOREMAN  Mailing Address 107 BELMEAD LANE		Date of Receipt  03 14 2016		
City TYLER  FEC ID number of contributing	State Zip Code TX 75701	03 14 2016  Transaction ID : SA11AI.6536  Amount of Each Receipt this Period  106.00		
federal political committee.  Name of Employer  SELF EMPLOYED	Occupation PHYSICIAN	Memo Item		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  282.00			
Full Name (Last, First, Middle Initial)  KIM FOREMAN  Mailing Address 107 BELMEAD LANE		Date of Receipt  03 31 2016		
City TYLER	State Zip Code TX 75701	Transaction ID : SA11AI.6568  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	106.00 Memo Item		
SELF EMPLOYED  Receipt For:  Primary General  Other (specify) ▼	PHYSICIAN  Aggregate Year-to-Date ▼  388.00			
Full Name (Last, First, Middle Initial)  HOWARD GARB  Mailing Address 3414 GOLDEN ROAD		Date of Receipt		
City TYLER  FEC ID number of contributing federal political committee.	State Zip Code TX 75701	03 14 2016  Transaction ID : SA11AI.6541  Amount of Each Receipt this Period		
Name of Employer  SELF EMPLOYED  Receipt For:	Occupation PHYSICIAN	Memo Item		
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  272.00			
SUBTOTAL of Receipts This Page (optional)		314.00		
TOTAL This Period (last page this line numbe	r only)			

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) **HOWARD GARB** Date of Receipt Mailing Address 3414 GOLDEN ROAD 2016 03 31 City State Zip Code Transaction ID: SA11AI.6573 TX **TYLER** 75701 Amount of Each Receipt this Period FEC ID number of contributing C 102.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 374.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** GARY GOODFRIED Date of Receipt Mailing Address 19140 FALLS CREEK 02 03 2016 City State Zip Code Transaction ID: SA11AI.6491 TX **FLINT** 75762 Amount of Each Receipt this Period FEC ID number of contributing 287.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 478,00 Full Name (Last, First, Middle Initial) c. GARY GOODFRIED Date of Receipt Mailing Address 19140 FALLS CREEK 03 14 2016 City Zip Code State Transaction ID: SA11AI.6522 TX **FLINT** 75762 Amount of Each Receipt this Period FEC ID number of contributing С 287.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) 676.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

- 9

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC	
Full Name (Last, First, Middle Initial) GARY GOODFRIED Mailing Address 19140 FALLS CREEK	Stata 7in Codo	Date of Receipt  03 31 2016
City FLINT  FEC ID number of contributing federal political committee.  Name of Employer SELF EMPLOYED Receipt For:	State Zip Code TX 75762  C  Occupation PHYSICIAN	Transaction ID : SA11AI.6552  Amount of Each Receipt this Period  287.00  Memo Item
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  1052.00	
Full Name (Last, First, Middle Initial)  CHARLES GORDON  Mailing Address 7302 HOLLYTREE DRIVE  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer SELF EMPLOYED  Receipt For:  Primary General Other (specify)	State Zip Code TN 75703  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  203.00	Date of Receipt  O1 14 2016  Transaction ID: SA11AI.6463  Amount of Each Receipt this Period  203.00  Memo Item
Full Name (Last, First, Middle Initial) CHARLES GORDON  Mailing Address 7302 HOLLYTREE DRIVE  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary General Other (specify)	State Zip Code TN 75703  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  507.00	Date of Receipt  02 03 2016  Transaction ID : SA11Al.6492  Amount of Each Receipt this Period  304.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	····	794.00
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 16 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) CHARLES GORDON Date of Receipt Mailing Address 7302 HOLLYTREE DRIVE 2016 03 City Zip Code State Transaction ID: SA11AI.6523 TN **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing C 304.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 811.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CHARLES GORDON Date of Receipt Mailing Address 7302 HOLLYTREE DRIVE 03 31 2016 City State Zip Code Transaction ID: SA11AI.6553 TN **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing 304.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1115.00 Full Name (Last, First, Middle Initial) c. THOMAS GRAHAM Date of Receipt Mailing Address 533 WILDER WAY 02 03 2016 City Zip Code State Transaction ID: SA11AI.6493 TN **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing С 294.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 490.00 Other (specify) 902.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) THOMAS GRAHAM Date of Receipt Mailing Address 533 WILDER WAY 2016 03 City Zip Code State Transaction ID: SA11AI.6524 TN **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing C 294.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 784.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** THOMAS GRAHAM Date of Receipt Mailing Address 533 WILDER WAY 03 31 2016 City State Zip Code Transaction ID: SA11AI.6554 TN **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing 294.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1078.00 Full Name (Last, First, Middle Initial) c. DUANE GRIFFITH Date of Receipt Mailing Address 7113 TURNBERRY CIRCLE 03 14 2016 City Zip Code State Transaction ID: SA11AI.6544 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing С 87.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 231.00 Other (specify) 675.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT H	OSPITAL PAC	
Full Name (Last, First, Middle Initial)  DUANE GRIFFITH  Mailing Address 7113 TURNBERRY CIRCL  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary General Other (specify)	State Zip Code TX 75703  C Occupation PHYSICIAN Aggregate Year-to-Date  318.00	Date of Receipt  03 31 2016  Transaction ID: SA11AI.6545  Amount of Each Receipt this Period  87.00  Memo Item
Full Name (Last, First, Middle Initial)  JAMES HARRIS  Mailing Address 9243 CHISHOLM TRAIL  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer SELF EMPLOYED  Receipt For: Primary General Other (specify)	State Zip Code TX 75703  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  300.00	Date of Receipt  03 14 2016  Transaction ID: SA11AI.6525  Amount of Each Receipt this Period  100.00  Memo Item
Full Name (Last, First, Middle Initial)  JAMES HARRIS  Mailing Address 9243 CHISHOLM TRAIL  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary General Other (specify)	State Zip Code TX 75703  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  400.00	Date of Receipt  03 31 2016  Transaction ID: SA11AI.6555  Amount of Each Receipt this Period  100.00  Memo Item
SUBTOTAL of Receipts This Page (optional).	<u> </u>	287.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT H	OSPITAL PAC	
Full Name (Last, First, Middle Initial) STEUART HEATON  Mailing Address 3413 GOLDEN ROAD		Date of Receipt
City TYLERT  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary General Other (specify) ▼	State Zip Code TX 75701  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  249.00	Transaction ID: SA11AI.6539  Amount of Each Receipt this Period  83.00  Memo Item
Full Name (Last, First, Middle Initial)  STEUART HEATON  Mailing Address 3413 GOLDEN ROAD  City TYLERT  FEC ID number of contributing federal political committee.  Name of Employer SELF EMPLOYED  Receipt For: Primary General Other (specify)	State Zip Code TX 75701  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  332.00	Date of Receipt  03 31 2016  Transaction ID: SA11AI.6571  Amount of Each Receipt this Period  83.00  Memo Item
Full Name (Last, First, Middle Initial)  JEFF HUNTER  Mailing Address 3415 GOLDEN ROAD  City TYLER  FEC ID number of contributing federal political committee.  Name of Employer  SELF EMPLOYED  Receipt For:  Primary General Other (specify)	State Zip Code TX 75701  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  216.00	Date of Receipt  03 14 2016  Transaction ID: SA11AI.6542  Amount of Each Receipt this Period  81.00  Memo Item
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	247.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 20 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) JEFF HUNTER Date of Receipt Mailing Address 3415 GOLDEN ROAD 2016 03 31 City State Zip Code Transaction ID: SA11AI.6543 TX **TYLER** 75701 Amount of Each Receipt this Period FEC ID number of contributing C 81.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 297.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** MATT JONES Date of Receipt Mailing Address 3414 GOLDEN ROAD 03 14 2016 City State Zip Code Transaction ID: SA11AI.6538 TX **TYLER** 75701 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 249,00 Full Name (Last, First, Middle Initial) c. MATT JONES Date of Receipt Mailing Address 3414 GOLDEN ROAD 03 31 2016 City Zip Code State Transaction ID: SA11AI.6570 TX **TYLER** 75701 Amount of Each Receipt this Period FEC ID number of contributing С 83.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 332.00 Other (specify) 247.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 21 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) JAMES MICHAELS Date of Receipt Mailing Address 2013 HOLLY CREEK DR. 2016 0.3 City Zip Code State Transaction ID: SA11AI.6495 **TYLER** TX 75703 Amount of Each Receipt this Period FEC ID number of contributing C 296.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 493.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JAMES MICHAELS Date of Receipt Mailing Address 2013 HOLLY CREEK DR. 03 14 2016 City State Zip Code Transaction ID: SA11AI.6526 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing 296.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 789,00 Full Name (Last, First, Middle Initial) c. JAMES MICHAELS Date of Receipt Mailing Address 2013 HOLLY CREEK DR. 03 31 2016 City Zip Code State Transaction ID: SA11AI.6557 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing С 296.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1085.00 Other (specify) 888.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 22 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) JOHN PRIDDY Date of Receipt Mailing Address 17950 TIMOTHY CT. 2016 03 City State Zip Code Transaction ID: SA11AI.6504 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing C 144.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOHN PRIDDY Date of Receipt Mailing Address 17950 TIMOTHY CT. 03 14 2016 City State Zip Code Transaction ID: SA11AI.6534 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing 144.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 384,00 Full Name (Last, First, Middle Initial) c. JOHN PRIDDY Date of Receipt Mailing Address 17950 TIMOTHY CT. 03 31 2016 City State Zip Code Transaction ID: SA11AI.6566 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing С 144.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 528.00 Other (specify) 432.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

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Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) TODD RAABE Date of Receipt Mailing Address 16987 FM 756 2016 City Zip Code State Transaction ID: SA11AI.6467 TX WHITEHOUSE 75791 Amount of Each Receipt this Period FEC ID number of contributing C 251.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 251.00 Other (specify) Full Name (Last, First, Middle Initial) B. TODD RAABE Date of Receipt Mailing Address 16987 FM 756 02 03 2016 City State Zip Code Transaction ID: SA11AI.6496 WHITEHOUSE TX 75791 Amount of Each Receipt this Period FEC ID number of contributing 376.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 627.00 Full Name (Last, First, Middle Initial) c. TODD RAABE Date of Receipt Mailing Address 16987 FM 756 M M / 03 14 2016 City Zip Code State Transaction ID: SA11AI.6527 TX WHITEHOUSE 75791 Amount of Each Receipt this Period FEC ID number of contributing С 376.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General

1003.00

FE6AN026

Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7

1003.00

FOR LINE NUMBER: PAGE 24 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) TODD RAABE Date of Receipt Mailing Address 16987 FM 756 2016 03 31 City Zip Code State Transaction ID : SA11AI.6558 TX WHITEHOUSE 75791 Amount of Each Receipt this Period FEC ID number of contributing C 376.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1379.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** MARK RENFRO Date of Receipt Mailing Address 2737 OLD BULLARD ROAD 02 03 2016 City State Zip Code Transaction ID: SA11AI.6497 **TYLER** TX 75701 Amount of Each Receipt this Period FEC ID number of contributing 237.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 395,00 Full Name (Last, First, Middle Initial) c. MARK RENFRO Date of Receipt Mailing Address 2737 OLD BULLARD ROAD M M / 03 14 2016 City Zip Code State Transaction ID: SA11AI.6528 TX **TYLER** 75701 Amount of Each Receipt this Period FEC ID number of contributing С 237.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 632.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 25 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) MARK RENFRO Date of Receipt Mailing Address 2737 OLD BULLARD ROAD 2016 03 31 City Zip Code State Transaction ID: SA11AI.6559 TX **TYLER** 75701 Amount of Each Receipt this Period FEC ID number of contributing C 237.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 869.00 Other (specify) Full Name (Last, First, Middle Initial) B. MICHAEL RUSSELL Date of Receipt Mailing Address 5930 BRIXWORTH 02 03 2016 City State Zip Code Transaction ID: SA11AI.6498 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing 280.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 467.00 Full Name (Last, First, Middle Initial) c. MICHAEL RUSSELL Date of Receipt Mailing Address 5930 BRIXWORTH 03 14 2016 City Zip Code State Transaction ID: SA11AI.6529 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing С 280.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 747.00 Other (specify) 797.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 26 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

ITEMIZED RECEIPTS 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) MICHAEL RUSSELL Date of Receipt Mailing Address 5930 BRIXWORTH 2016 03 31 City State Zip Code Transaction ID: SA11AI.6560 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing C 280.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1027.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** WILLIAM SCHREIBER Date of Receipt Mailing Address 6407 HOLLYTREE CIRCLE 03 14 2016 City State Zip Code Transaction ID: SA11AI.6531 TN **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 249,00 Full Name (Last, First, Middle Initial) c. WILLIAM SCHREIBER Date of Receipt Mailing Address 6407 HOLLYTREE CIRCLE 03 31 2016 City Zip Code State Transaction ID: SA11AI.6563 TN **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing С 83.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 332.00 Other (specify) 446.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 27 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) JERRY SCHWARZBACH Date of Receipt Mailing Address 8304 COLUMBIA DRIVE 2016 03 City State Zip Code Transaction ID: SA11AI.6532 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JERRY SCHWARZBACH Date of Receipt Mailing Address 8304 COLUMBIA DRIVE 03 31 2016 City State Zip Code Transaction ID: SA11AI.6564 TX **TYLER** 75703 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. CLAIRE TIBILETTI Date of Receipt Mailing Address 16690 DRIFTWOOD 03 02 2016 City Zip Code State Transaction ID: SA11AI.6503 TX **TYLER** 75707 Amount of Each Receipt this Period FEC ID number of contributing С 167.00 federal political committee. Memo Item Name of Employer Occupation SELF EMPLOYED **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 334.00 Other (specify) 367.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT H	OSPITAL PAC	
Full Name (Last, First, Middle Initial)  CLAIRE TIBILETTI  Mailing Address 16690 DRIFTWOOD		Date of Receipt
City TYLER  FEC ID number of contributing federal political committee.  Name of Employer SELF EMPLOYED Receipt For: Primary General Other (specify)	State Zip Code TX 75707  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  501.00	Transaction ID : SA11AI.6533  Amount of Each Receipt this Period  167.00  Memo Item
Full Name (Last, First, Middle Initial)  CLAIRE TIBILETTI  Mailing Address 16690 DRIFTWOOD  City  TYLER  FEC ID number of contributing federal political committee.  Name of Employer SELF EMPLOYED  Receipt For:  Primary General  Other (specify)   Other (specify)	State Zip Code TX 75707  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  668.00	Date of Receipt  03 31 2016  Transaction ID: SA11AI.6565  Amount of Each Receipt this Period  167.00  Memo Item
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)	State Zip Code  C Occupation  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y  Amount of Each Receipt this Period  Memo Item
SUBTOTAL of Receipts This Page (optional).	<u> </u>	334.00
TOTAL This Period (last page this line numb	er only)	13753.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	I llog congrete cohodulo(s) I		NE NUMBER: PAGE 29 OF 30 only one)		
II LIVIIZED DISBUNSEIVIEN IS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPI	•				
Full Name (Last, First, Middle Initial)  A. NRSC - NONFEDERAL			Date of Disbursement		
Mailing Address			02 01 2016		
•	State Zip Code VA		Transaction ID : SB23.6484		
Purpose of Disbursement  Candidate Name			Amount of Each Disbursement this Period		
		Category/ Type	15000.00		
	nent For: Primary General Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)					
3. PHA, PAC			Date of Disbursement		
Mailing Address			02 12 2016		
City	State Zip Code		Transaction ID : SB23.6514		
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	5000.00		
	nent For: Primary General Other (specify)		Memo Item		
State: District:  Full Name (Last, First, Middle Initial)					
2.			Date of Disbursement		
Mailing Address			M M / D D / Y Y Y Y		
City	State Zip Code				
Purpose of Disbursement					
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
	nent For: Primary General Other (specify) ▼		Memo Item		
SUBTOTAL of Disbursements This Page (optional)			20000.00		
TOTAL This Period (last page this line number only).			20000.00		

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Detailed Surmany Page	TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orliny		
Awy information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee.  NAME OF COMMITTEE (in Full) TEXAS SPINE AND JOINT HOSPITAL PAC  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Disbursement  Candidate Name  Category/ Type  Disbursement  Candidate Name  Category/ Type  Disbursement  Candidate Name  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item					
Amount of Each Disbursement this Period  Cardidate Name  Candidate Name  N	Any information copied from such Reports and Statem	ents may not be sold or us			
TEXAS SPINE AND JOINT HOSPITAL PAC  Full Name (Last, First, Middle Initial)  City					
Full Name (Last, First, Middle Initial)  CHRIS GREEN CAMPAIGN  Mailing Address  City State Zip Code TX 75701  Transaction ID : \$829.6454  Amount of Each Disbursement this Period	,				
Date of Disbursement  City State Zip Code TX 78701  Transaction ID : \$829.6454  Amount of Each Disbursement this Period  Carlegory' Type  Cottogory' Type  Cottogory Typ	angle TEXAS SPINE AND JOINT HOSPI	TAL PAC			
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